## RECEIVEL **497 Contribution Report** Amounts may be rounded to whole dollars. 497 CONTRIBUTION REPORT CITY OF EDV Date Stamp NAME OF FILER **CALIFORNIA** Date of **FORM** Harper for City Council 2020 AREA CODE/PHONE NUMBER I.D. NUMBER (if applicable) For Official Use Only Report No. 20-5(714)863-3574 1430436 CITY OF COSTA MESA STREET ADDRESS ☐ Amendment 3061 Capri Ln to Report No. (explain below) CITY STATE ZIP CODE No. of Pages \_\_\_ CA 92626 Costa Mesa 1. Contribution(s) Received IF AN INDIVIDUAL, DATE FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CONTRIBUTOR **AMOUNT** ENTER OCCUPATION AND EMPLOYER RECEIVED (IF COMMITTEE, ALSO ENTER I.D. NUMBER) CODE \* RECEIVED (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) 10/03/2020 Insurance Broker 2,500.00 Chris Clevidence X IND Clevidence Insurance Services COM OTH ☐ Check if Loan П PTY ☐ SCC Provide interest rate IND COM OTH П ☐ Check if Loan PTY SCC Provide interest rate ☐ IND COM OTH ☐ Check if Loan PTY SCC Provide interest rate \*Contributor Codes IND - Individual

Reason for Amendment: \_

FPPC Form 497 (Feb/2019) FPPC Advice: advice@fppc.ca.gov (866/275-3772)

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COM - Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity)

SCC - Small Contributor Committee

PTY - Political Party